ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH (OF THE ABOVE LISTE	D VOUCHERS AND TH	E INVOICES, OR	BILLS ATTA	CHED THERETO,
ARE TRUE AND CORRECT AND I F	HAVE AUDITED SAME _, 2009	IN ACCORDANCE WITH JUDITH C. RHODI FISCAL OFFICER	1 CM	.6. <u>UW</u> V	
WE HAVE EXAMINED THE VOUCHER	RS LISTED ON THE F	OREGOING ACCOUNTS	PAYABLE VOUCH	ER REGISTER	, CONSISTING OF
PAGES, AND EXCEPT FOR VOU	ICHERS NOT ALLOWED	AS SHOWN ON THE I	REGISTER SUCH	VOUCHERS ARE	HEREBY ALLOWED
IN THE TOTAL AMOUNT OF \$	240.00	DATED THIS 17th	DAY OF	July	2009.
APPROVED BY STATE BOARD OF A	CCOUNTS IN 2001 F	OR CI	ΓY OF WEST LAF	AYETTE	
	-			The same and a second	
				The Note of the Section	
				The Entire productions	

7/17/09 3:46:00

ACCOUNTS PAYABLE VOUCHER REGISTER

BDA45/HEATHER PAGE 1

CITY OF WEST LAFAYETTE

FOR THE PERIOD OF 7/17/09 - 7/17/09

	OUCHER VENDOR NAMI	-	DUE DATE							AMOUNT
PO_#	INVOICE NUMBER	DESCRIPTION	FND	PROGRAM	OBJECT	CC	ACCOU	IT TITLE	VOUCHER AMOUNT	ALLOWED
2224	2224 JUDITH RHODES FLEX PLAN	S, FLEX ACCOUNT FLEX PLAN MEDICAL	7/17/09 811	811.00	. 00	0	FLEXIBLE	: PLAN MEDICAL CHECK AMOUNT	240.00 240.00	240.00
				PRE-WRITTEN TOTAL				240.00		
								240.00		

7/17/09 3:46:00

FUND SUMMARY

BDA45/HEATHER PAGE 2

CITY OF WEST LAFAYETTE

FUND DESCRIPTION

VOUCHER TOTAL

811 FLEXIBLE PLAN MEDICAL

240.00

GRAND TOTAL

240.00